STATE OF ALASKA ALASKA OIL AND GAS CONSERVATION COMMISSION

RESERVOIR PRESSURE REPORT

1. Operator: 2. Address:												
3. Unit or Lease Name:					4. Field and Pool:			5. Datum Reference:		6. Oil Gravity:	7. Gas Gravity:	
8. Well Name and Number:	9. API Number 50-XXX-XXXXX-XX	10. Oil (O) or Gas (G)	11. AOGCC Pool Code	12. Final Test Date	13. Shut-In Time, Hours	14. Press. Surv. Type (see instructions for codes)	15. B.H. Temp.	16. Depth Tool TVDss	17. Final Observed Pressure at Tool Depth	18. Datum TVDss (input)	19. Pressure Gradient, psi/ft.	20. Pressure at Datum (cal)
	herein were made in acco				and instructions	s of the Alaska O	il and Gas Co	onservation Comr	mission.			
Signature												
Printed Name							Date					

GENERAL NOTES AND INSTRUCTIONS FOR REPORTING RESERVOIR PRESSURES FORM 10-412:

This report shall be submitted, in duplicate, not later than the last day of the month immediately following the month in which tests were made. All bottom hole pressure tests reported herein shall be made by a person qualified by both training and experience to make such tests.

Calibration: The subsurface bomb-type pressure tool shall be calibrated against a U.S. Bureau of Standards certified dead weight tester both prior and subsequent to the dates at which all tests reported hereon are made, and in no case shall this time exceed a period of one month. The prior and subsequent calibrations shall not disagree by more than one percent (1%).

If the subsurface pressure tool is a quartz crystal pressure gauge or electronic gauge its calibration is subject to inspection by the AOGCC.

Block No:

- 5 Datum Reference: Shall be in feet above or below sea level, per conservation order / area injection order, if applicable.
- 7 Gas Gravity: Shall be determined from an analysis of the casinghead gas.
- 9 All API numbers reported to AOGCC must consist of 14 digits (ex: 50-029-20123-00-00).
- 12 Date Tested: Enter in this column the month and day on which the bottom hole pressure test was made.
- Shut-in Time: Shall be reported accurately to the nearest hour. The well tested shall have produced its normal daily rate of production or allowable within the 24-hour period immediately preceding the time at which it was shut-in. (Any deviations shall be certified on this report and shall be approved by the AOGCC.)
- 14 Pressure Survey Type Codes:

DST - drill stem test

EXRT1 - extrapolate - single phase

MRT - multi-rate tests, 4 point, isochronal, AOF, etc.

PBU - pressure build up

PFO - pressure fall off

RFT - formation tester

SBHP - static bottom hole pressure

OTHER - please explain at bottom of form

- Bottom Hole Temperature: Shall be reported in degrees Fahrenheit as determined at test depth by either a recording or maximum reading thermometer.
- 16 Tool Depth: Shall be reported in feet as measured depth at the point to which the pressure tool was stationed.
- 17 Final Observed Pressure at Tool Depth: Shall be reported as the pressure in pounds per square inch gauge observed at test depth before any necessary depth and temperature corrections have been made.
- 19 Pressure Gradient: Shall be in pounds per square inch per foot based on check points from the pressure tool.
- 20 Pressure at Datum: The datum pressure shall be representative of the near well reservoir pressure. Only one pressure shall be reported per well unless there are separate discreet reservoir tests being documented.
 - (a) In the case of pressure tool measurements, this pressure shall be the observed pressure after the corrections for reservoir temperature and for the difference between test depth and datum reference have been made. It shall be reported in pounds per square inch gauge.
 - (b) In the case of sonic measurements this pressure shall be determined from the weight of the fluid column plus the weight of any gas present above the fluid column plus casinghead pressure after proper corrections are made for temperature.

Form 10-412 Rev. 9/2003 Submit in Duplicate